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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**
 Declaration Submitted With Initial Filing

OR

 Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	TOM2809US02
First Named Inventor	Stefan Gafner
COMPLETE IF KNOWN	
Application Number	10/655,935
Filing Date	September 5, 2003
Art Unit	1654
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

EXTRACT OF MAD-DOG SKULLCAP*(Title of the Invention)*

the specification of which

 is attached hereto
OR
 was filed on (MM/DD/YYYY) 09/05/2003 as United States Application Number or PCT International
Application Number 10/655,935 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

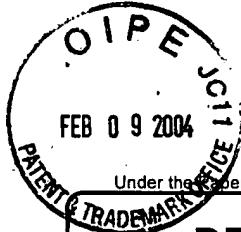
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any])

Stefan

Family Name
or Surname

Gafner

Inventor's
Signature*S. Gafner*

Date

1-16-04

Residence: City
KennebunkportState
MaineCountry
USACitizenship
SwissMailing Address
93R Wildes District RoadCity
KennebunkportState
MaineZIP
04046Country
USA**NAME OF SECOND INVENTOR:** A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any])

Chantal

Family Name
or Surname BergeronInventor's
Signature*Chantal Bergeron*

Date

1-15-04

Residence: City
KennebunkportState
MaineCountry
USACitizenship
CanadianMailing Address
93R Wildes District RoadCity
KennebunkportState
MaineZIP
04046Country
USA Additional inventors or a legal representative are being named on the **1** supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.



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DECLARATION

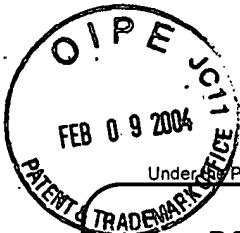
ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page _____ of _____

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Fiona Elizabeth		Russell	
Inventor's Signature	<i>Fiona Russell</i>		Date 1/14/04
Residence: City	Kennebunkport	State	Maine
Mailing Address	106 Arundel Road		
Mailing Address			
City Kennebunkport		State	Maine
		Zip	04046
		Country USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address			
Mailing Address			
City		State	Zip
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address			
Mailing Address			
City		State	Zip
		Country	

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PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**POWER OF ATTORNEY
and
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INDICATION FORM**

Application Number	10/655,935
Filing Date	September 5, 2003
First Named Inventor	Stefan Gafner
Title	Extract of Mad-Dog Skullcap
Art Unit	1654
Examiner Name	
Attorney Docket Number	TOM2809US02

I hereby appoint:

 Practitioners associated with the Customer Number:

27723

OR

 Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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State

Zip

Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Stefan Gafner		
Signature			
Date	01-15-2004	Telephone	207 385 2944

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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 The address associated with Customer Number:

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<input type="checkbox"/>	Firm or Individual Name
Address	
Address	
City	State
Country	Zip
Telephone	Fax

I am the:

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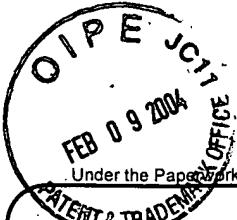
Name	Chantal Bergeron		
Signature	<i>Chantal Bergeron</i>		
Date	1-15-04	Telephone	207-967-5272

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SIGNATURE of Applicant or Assignee of RecordName Fiona RussellSignature Fiona RussellDate 1/14/04Telephone 207 985 1188 X363

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